Fill in this information	tion to identify your case:		
Debtor 1:	Donald Glenn Huey Full Name (First, Middle, Last)		
Debtor 2: (Spouse, if filing)	Cheryl Lyn Huey Full Name (First, Middle, Last)		Check if this is an amended plan, and list below the
United States Ba	ankruptcy Court for the: Northern District of Mississippi		sections of the plan that have been changed.
Case Number: (if known)		_	

Chapter 13 Plan and Motions for Valuation and Lien Avoidance

12/17

Part 1: No

Notices

To Debtors:

This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances or that it is permissible in your judicial district. Plans that do not comply with local rules and judicial rulings may not be confirmable. The treatment of ALL secured and priority debts must be provided for in this plan.

In the following notice to creditors, you must check each box that applies.

To Creditors:

Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.

You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.

If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation on or before the objection deadline announced in Part 9 of the Notice of Chapter 13 Bankruptcy Case (Official Form 309I). The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See Bankruptcy Rule 3015.

The plan does not allow claims. Creditors must file a proof of claim to be paid under any plan that may be confirmed.

The following matters may be of particular importance. Debtors must check one box on each line to state whether or not the plan includes each of the following items. If an item is checked as "Not Included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.

1.1	A limit on the amount of a secured claim, set out in Section 3.2, which may result in a partial payment or no payment at all to the secured creditor	☑ Included	☐ Not included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section 3.4	Included	✓ Not included
1.3	Nonstandard provisions, set out in Part 8	Included	☑ Not included

Part 2:

Plan Payments and Length of Plan

2.1 Length of Plan.

debt	n period shall be for a period of months, not to be less than 36 months or less than 60 months for above median income s). If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the not sto creditors specified in this plan.
2.2	ebtor(s) will make regular payments to the trustee as follows:
	shall pay \$149.54 (\bigcap monthly, \bigcap semi-monthly, \bigcap weekly, or \bigcap bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by rt, an Order directing payment shall be issued to the debtor's employer at the following address:
	Century Co 705 Robert Ezee Dr Tupelo, MS 38801
	ebtor shall pay\$2,000.00 (monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise by the court, an Order directing payment shall be issued to the joint debtor's employer at the following address:
	Direct Pay
2.3	come tax returns/refunds.
	heck all that apply.
	 Debtor(s) will retain any exempt income tax refunds received during the plan term. Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all non-exempt income tax refunds received during the plan term. Debtor(s) will treat income tax refunds as follows:
2.4	dditional payments.
	heck one.
	None. If "None" is checked, the rest of § 2.4 need not be completed or reproduced. Debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.
Pa	3: Treatment of Secured Claims
3.1	ortgages. (Except mortgages to be crammed down under 11 U.S.C. § 1322(c)(2) and identified in § 3.2 herein.)
	heck all that apply.
	None. If "None" is checked, the rest of § 3.1 need not be completed or reproduced.
3.1(a	Principal Residence Mortgages: All long term secured debt which is to be maintained and cured under the plan pursuant to 11 U.S.C. § 1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed herein.
3.1(a	None. If "None" is checked, the rest of § 3.1 need not be completed or reproduced. Principal Residence Mortgages: All long term secured debt which is to be maintained and cured under the plan pursuant to U.S.C. § 1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed.

	1 st Mtg pmts to			
	Beginning	@	Plan _ Direct.	Includes escrow \(\bigcup \text{ Yes } \bigcup \text{ No} \)
	1 st Mtg arrears to		Through	
3.1(b)	Non-Principal Residence Mortgages: All I 11 U.S.C. § 1322(b)(5) shall be scheduled by the proof of claim filed by the mortgage creci herein.	oelow. Absent an obje	ction by a party in interest,	the plan will be amended consistent wit
	Property 1 address:			
	Mtg pmts to			
	Beginning	@	Plan _ Direct.	Includes escrow \(\bigcup \text{Yes} \(\bigcup \text{No} \)
	Property 1 Mtg arrears to		Through	
3.1(c) 🗹	Mortgage claims to be paid in full over the consistent with the proof of claim filed by the Creditor: First Bank	e mortgage creditor.	an objection by a party in ir	nterest, the plan will be amended Int. Rate*: 10.00%
	Property Address: 111a Hill Ave Saltillo,	, MS 38866-9151		
	Principal Balance to be paid with interest at (as stated in Part 2 of the Mortgage Proof o	· · · · · · · · · · · · · · · · · · ·	701.00	-
	Portion of claim to be paid without interest: (Equal to Total Debt less Principal Balance)	·		
□ ! ☑ !	Special claim for taxes/insurance: \$109.73 (as stated in Part 4 of the Mortgage Proof o		/month, beginning 03/0	1/2025
	*Unless otherwise ordered by the court, the	e interest rate shall be	the current Till rate in this [District.
3.2 Moti	ion for valuation of security, payment of ful	lly secured claims, a	nd modification of under	secured claims. Check one.
<u></u>	None. If "None" is checked, the rest of § 3.2 n	need not be completed	or reproduced.	
	The remainder of this paragraph will be el	ffective only if the ap	oplicable box in Part 1 of	this plan is checked.
— t	Pursuant to Bankruptcy Rule 3012, for purpos amounts to be distributed to holders of secure the lesser of any value set forth below or any the objection deadline announced in Part 9 of	ed claims, debtor(s) he value set forth in the p	ereby move(s) the court to vorcof of claim. Any objection	value the collateral described below at n to valuation shall be filed on or before

The portion of any allowed claim that exceeds the amount of the secured claim will be treated as an unsecured claim under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in this paragraph.

Name of creditor	Estimated amount of creditor's total claim #	Collateral	Value of collateral	Amount of secured claim	Interest rate*
Performance Finance	\$3,436.00	2012 Polaris ATV	\$5,000.00	\$3,436.00	10.00%
#For mobile homes and real estate ide	entified in § 3.2: Special Cl	laim for taxes/insurance	9:		
Name of creditor		Collateral	Amount pe month	r Be	ginning
*Unless otherwise ordered by the cour	rt, the interest rate shall be	e the current <i>Till</i> rate in	this District.		
For vehicles identified in § 3.2: The cu	rrent mileage is <u>(2012 Po</u>	olaris ATV)			
3.3 Secured claims excluded from	11 U.S.C. § 506.				
Check one.					
for the personal use of	of the petition date and sec full under the plan with inte claim filed before the filing	cured by a purchase mo erest at the rate stated g deadline under Bankru	oney security interest in below. Unless otherwise uptcy Rule 3002(c) conti	any other thing of ordered by the ools over any cor	of value.
Name of creditor		Collateral	Ar	mount of claim	Interest rate
Hyundai Motor Finance	2024	Hyundai Santa Fe		\$46,252.00	10.00%
TD Auto Finance	2022	Ram 1500		\$36,279.00	10.00%
*Unless otherwise ordered by the count. 3.4 Motion to avoid lien pursuant to Check one. None. If "None" is checked, The remainder of this part.	to 11 U.S.C. § 522.	be completed or reprodu	uced.	an is checked.	
☐ The judicial liens or nonposs	sessory, nonpurchase mon	ney security interests se	curing the claims listed	below impair exe	emptions to

4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan unless the creditor files an objection on or before the objection deadline announced in Part 9 of the Notice of Chapter 13 Bankruptcy Case (Official Form 309I). Debtor(s) hereby move(s) the court to find the amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule

	Name of creditor	Property s	ubject to lien	Lien amount to be avoided	Secured amount remaining	Type of lien	(county, court, judgment date, date of lien recording, county, court, book and page number)
3.5	Surrender of collateral.						
	Check one.						
	None. If "None" is che	cked, the rest	of § 3.5 need n	ot be completed or rej	oroduced.		
		his plan the sta	ay under 11 U.S	S.C. § 362(a) be termi	nated as to the colla	ateral only and t	The debtor(s) request that that the stay under § 1301 be treated in Part 5
	Nar	ne of creditor				Collateral	
Ma	ariner Finance			Househo	d Goods		
Ma	ariner Finance			Househo	d Goods		
Or	ne Main Financial Group LL	С		Househo	d Goods		
Re	enasant Wealth Managemer	nt		Maloney	Management 401k		
4.2	Trustee's fees and all allow without postpetition interes Trustee's fees		ims, including c	domestic support oblig	ations other than the	ose treated in §	4.5, will be paid in full
	Trustee's fees are governe	d by statute ar	nd may change	during the course of t	he case.		
4.3	Attorney's fees						
	✓ No look fee: \$4,000.0	0	·				
	Total attorney fee char	rged:	\$4,000.00		·		
	Attorney fee previously	y paid:	\$2,057.00		·		
	Attorney fee to be paid confirmation order:	d in plan per	\$1,943.00		·		
	Hourly fee:		(Subject to approval o	Fee Application.)		
4.4	Priority claims other than	n attorney's fe	es and those	treated in § 4.5.			
	Check one.						
	None. If "None" is che	cked, the rest	of § 4.4 need n	ot be completed or rep	produced.		
	☑ Internal Revenue Serv	vice \$5,341.92	2				
	✓ Mississippi Dept. of Re	evenue \$0.00					

Lien identification

	☑ Other None			
	\$0.00			
4.5	Domestic support obligations.			
	✓ None. If "None" is checked, the rest of §	4.5 need not be completed or rep	roduced.	
	DUE TO:			
	POST PETITION OBLIGATION: In the amount	nt of per mont	h beginning	
	To be paid \square direct, \square through payroll dedu	uction, or through the plan.		
	PRE-PETITION ARREARAGE: In the total ar full over the plan term, unless stated otherwise			which shall be paid in
	To be paid \square direct, \square through payroll dedu	action, or \square through the plan.		
Pa	Part 5: Treatment of Nonpriority Un	secured Claims		
5.1				
J. I	Allowed nonpriority unsecured claims that are	•	acid are rate If more than ano	antion is abanked the antion
	providing the largest payment will be effective	-	paid, pro rata. Il more than one	option is checked, the option
	☑ The sum of\$4,380.60			
	of the total amount of these cla			
	The funds remaining after disbursements	s have been made to all other cre-	ditors provided for in this plan.	
	If the estate of the debtor(s) were liquidated unRegardless of the options checked above, pa			
5.2	Other separately classified nonpriority un	secured claims (special claima	nts). Check one.	
	✓ None. If "None" is checked, the rest of §	5.2 need not be completed or rep	roduced.	
	☐ The nonpriority unsecured allowed claim	s listed below are separately clas	sified and will be treated as foll	ows
	Name of creditor	Basis for separate classification and treatment	Approximate amount owed	Proposed treatment
Pa	Part 6: Executory Contracts and Ur	nexpired Leases		
6.1	The executory contracts and unexpired lecontracts and unexpired leases are rejected		and will be treated as specifi	ed. All other executory
	■ None. If "None" is checked, the rest of §	6.1 need not be completed or rep	roduced.	
	Assumed items. Current installment pay subject to any contrary court order or rule payments disbursed by the trustee rather	e. Arrearage payments will be dis		•

Name of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage
AT&T	Other - Cellphone Contract	\$370.87		
		Disbursed by:		
		Trustee		
		✓ Debtor(s)		
Name of creditor property or executory contract payment paid Other - Cellphone Contract \$370.87 Disbursed by:				
		Disbursed by:		
		Trustee		
		Debtor(s)		
<u> </u>		charge.		
Part 8: Nonstandard Plan Provis	sions			
3.1 Check "None" or List Nonstandard Pla	an Provisions			
✓ None. If "None" is checked, the rest	of Part 8 need not be comple	eted or reproduced.		
				ovision not otherwise included
The following plan provisions will be effect	tive only if there is a check	in the box "Includ	ded" in § 1.3.	

9.1 Signatures of Debtor(s) and Debtor(s)' Attorney

The Debtor(s) and attorney for the Debtor(s), if any, must sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their complete address and telephone number.

Donald Glenn Huey Signature of Debtor 1 Signature of Debtor 2	nn Huey X /s/ Cheryl Lyn Huey	X	d Glenn Huey	/s/ Donal
Executed on 02/05/2025 MM / DD / YYYY				Donald Glenn Huey
MM / DD / YYYY 111a Hill Ave Address Line 1 Address Line 2 Saltillo, MS 38866-9151 City, State, and Zip Code Telephone Number /s/ Tiffany K. Pharr Signature of Attorney for Debtor(s) PO Box 1158 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	Signature of Debtor 2	\$		Signature of Debtor 1
111a Hill Ave	1/05/2025 Executed on 02/05/2025	F	02/05/2025	Executed on
Address Line 1 Address Line 2 Saltillo, MS 38866-9151 City, State, and Zip Code Telephone Number Telephone Number Telephone Number Date: 02/05/2025 MM / DD / YYYY Signature of Attorney for Debtor(s) PO Box 1158 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code [662) 844-7949 104849	MM / DD / YYYY		ryy	MM / DD / Y
Address Line 2 Saltillo, MS 38866-9151 City, State, and Zip Code Telephone Number Telephone Number Date: 02/05/2025 MM / DD / YYYY Signature of Attorney for Debtor(s) PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	111a Hill Ave	_		111a Hill Ave
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City, State, and Zip Code Telephone Number Telephone Number Telephone Number Date: 02/05/2025 MM / DD / YYYY Signature of Attorney for Debtor(s) PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	Address Line 2	Ā		Address Line 2
Telephone Number Ist Tiffany K. Pharr Date: 02/05/2025 Tiffany K. Pharr Date: MM / DD / YYYY	Saltillo, MS 38866-9151		51	Saltillo, MS 38866-91
/s/ Tiffany K. Pharr Tiffany K. Pharr Signature of Attorney for Debtor(s) PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	City, State, and Zip Code	Ō		City, State, and Zip Code
Tiffany K. Pharr Signature of Attorney for Debtor(s) PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	Telephone Number	7		Telephone Number
Tiffany K. Pharr Signature of Attorney for Debtor(s) PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849				
PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	Pharr Date: 02/05/2025	Date:	ny K. Pharr	/s/ Tiffa
PO Box 1158 Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849		N		-
Address Line 1 Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849	ptor(s)		or Debtor(s)	Signature of Attorney f
Address Line 2 Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849				PO Box 1158
Tupelo, MS 38802 City, State, and Zip Code (662) 844-7949 104849				Address Line 1
City, State, and Zip Code (662) 844-7949 104849				Address Line 2
(662) 844-7949 104849				Tupelo, MS 38802
· · ·			·	City, State, and Zip Code
			404040	(662) 844-7949
Telephone Number MS Bar Number	04849		104849	<u>, ,</u>